



CITY OF FITCHBURG
MASSACHUSETTS

Stephen D. Curry
Director of Public Health

**Vacant and/or Foreclosing
Property De-Registration**

(A separate De-Registration is required per property)
To De-register, mail, e-mail or hand-deliver this application to 166 Boulder Dr. Suite 108.

(Check all that apply)

☐ Vacant ☐ Foreclosing/Foreclosed (Occupied) ☐ Foreclosing/Foreclosed (Vacant)

1. Property Information ☐ Residential ☐ Residential/Commercial Mixed use

Property Address: _____ No. of Units _____

Description of Property: _____

2. Previous Owner/Agent Information

Previous Property Owner or Foreclosing Institution: _____

Contact Name: _____ Phone No _____

Address (**NO PO BOX**): _____

City: _____ State: _____ Zip _____

4. Mortgagee/Lien Holder Information

Name _____ Phone No _____

Address _____

5. New Owner / Agent / Mortgagee Information:

Name _____ Phone No _____

Address _____

In accordance with the City of Fitchburg's "Vacant and/or Foreclosing Property" Regulation, by signing the second page of this document and initialing each statement you certify that the information provided is accurate, and agree to notify the Health Department of any updates. _____ (please initial each section and on next page):

Date in which property became vacant _____ (If property not vacant write N/A and skip to section B below)

A. Please identify (check) the method used to keep vacant building secure:

_____ Secured all openings (according to applicable regulations) continuously until such time as building is reoccupied.

_____ Provide (24) hour watchman services continuously until such time as building is reoccupied.

____ Provide a monitored intruder alarm system at the perimeter of all floor accessible from grade continuously until such time as building is reoccupied.

B. Please Identify if utilities are: ____ on ____ off ____ Red tagged ____ Winterized ____ other

We have posted and maintained a "No Trespassing Sign" which complies with Building and Zoning Regulations. ____

We submit that we have inspected and maintained the property on a weekly basis for the duration of the vacancy, in accordance with the relevant City of Fitchburg codes. ____

Understand that the property may be periodically inspected City's Building Department, Health Department and Fire Department. ____

Understand that adherence to this regulation does not relieve the owner of any applicable obligations set forth in the City ordinances or regulations, Covenant Conditions and Restrictions, and/or Home Owners Association rules and regulations. ____

Understand we will continue to maintain the property according to regulations until (date of transfer) _____

Applicant Signature and Date

Applicant Printed name and Date

For office use only:

Date received: _____ Reviewed by: _____ Registration #: _____